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PATENT
Attorney Docket No.: 020375-003100US

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

On July 13, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Bonnie Larson

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JUL 22 2004

GROUP 3600**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Missy L. Villapudua

Application No.: 10/027,696

Filed: December 20, 2001

For: CUSTOMER PRIVACY
PROTECTION SYSTEMS AND
METHODS

Customer No.: 20350

Confirmation No.

Examiner: Woo, Richard Sukyoon

Technology Center/Art Unit: 3629

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed May 19, 2004, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.



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GROUP 3600

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/027,696
	Filing Date	December 20, 2001
	First Named Inventor	Villapudua, Missy L.
	Art Unit	3629
	Examiner Name	Woo, Richard Sukyoon
Total Number of Pages in This Submission	Attorney Docket Number	020375-003100US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP Darin J. Gibby Reg. No. 38,464	
Signature		
Date	July 13, 2004	

CERTIFICATE OF TRANSMISSION/MAILING			
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Typed or printed name	Connie Larson		
Signature		Date	July 13, 2004